

RBCA Tier 1 30-DAY RELEASE REPORT

FOR STATE USE ONLY	
If a different form is used transcribe all information.	
Facility ID #	Release #
DEQ Manager	City
Site Name	

DEPARTMENT OF ENVIRONMENTAL QUALITY
REMEDATION DIVISION
PETROLEUM RELEASE SECTION
P.O. BOX 200901
HELENA, MT 59620-0901
(406) 444-5970
Fax: (406) 444-1901

Completed form must be returned (postmarked) to the above address by _____.

PERSON COMPLETING THIS FORM

Name: _____ Position/Title: _____ Phone: _____

Mailing Address: _____

The information provided herein is accurate to the best of my knowledge.

A. FACILITY INFORMATION

Facility Name _____

Location (Street address or description, NO BOX NUMBERS) _____

Legal Description _____ 1/4, _____ 1/4, _____ 1/4, Sec. _____, T _____, R _____.

UST/PST System Owner/Operator _____ Phone _____

Property Owner/Operator _____ Phone _____

Contact Person _____ Phone _____

Contact Mailing Address _____

B. RELEASE INFORMATION

1. Release confirmed through (check all that apply):
____ Complaint; ____ Visual (stained or saturated soil); ____ Odors;
____ Inventory Records; ____ Leak detector alarm;
____ Tank removal; ____ Piping removal;
____ Groundwater sheen; ____ Groundwater free product;
____ Failed tank tightness test (volumetric/other); leak rate of ____ gal/hr, tested by/date _____;
____ Failed line tightness test (volumetric/other); leak rate of ____ gal/hr, tested by/date _____;
____ Field instrumentation/screening (model/type _____) w/maximum readings of _____;
____ Soil analytical results, *mg/kg*: GRO _____; TPH _____; DRO _____; TEH _____;
BTEX _____; MTBE _____; VPH _____; EPH _____; Other required analysis _____.
Groundwater analytical results, *ug/L*: B _____ T _____ E _____ X _____; MTBE _____;
Other required analysis _____
2. Product (s) lost: Type _____; Quantity (if known) _____
3. From: tank ____; piping ____; overfills ____; spill ____; unknown ____.
Probable cause of release: _____

C. GEOLOGIC INFORMATION

1. Describe soil type(s)(sand, gravel, clay, cobbles, etc) and changes with depth. Include a diagram, if available.

2. Depth to groundwater: _____ seasonal high; _____ seasonal low
3. Local groundwater flow direction _____ determined by _____
4. Depth to bedrock _____ bedrock type _____
5. Slope of the local topography _____
6. Ground cover at point of release: Asphalt ____; Concrete ____; Gravel ____; Native soil ____; Other ____
7. Was water present in the excavation? _____. If yes, how far below surface grade? _____.
If water was present in the excavation, was a sheen (rainbow) observed? _____. Was a petroleum odor present? _____.

D. SITE CHARACTERISTICS

1. Distance and direction to nearest receptors

a. Water wells (Complete the following table. Include the nearest municipal well and other neighboring wells):

WELL INFORMATION	Your Well	Well	Well	Well
Distance from release				
Direction from release				
Total well depth				
Depth to water				
Use of water				

b. Distance (ft) and direction to nearest surface water (e.g., river, lake, stream, irrigation/drainage ditch):

c. Distance (ft) and direction to nearest underground utility: Storm drain _____; sewer _____;
water _____; electric _____; telephone _____; gas _____; other _____

d. Distance and direction to nearest structure: with basement _____; without basement _____

e. Distance and direction to property boundaries: _____

f. Distance and direction to other potential petroleum sources in the immediate area: _____

2. Current land use (check all that apply):

a. Facility: Residential _____; commercial _____; industrial _____; agricultural _____; other _____.

b. Surrounding area: Residential _____; commercial _____; industrial _____; agricultural _____; other _____.

3. Future anticipated land use (check all that apply):

a. Facility: Residential _____ commercial _____ industrial _____ agricultural _____ other _____.

b. Surrounding area: Residential _____ commercial _____ industrial _____ agricultural _____ other _____.

E. RELEASE IMPACTS

1. Vapors (check all that apply): Home _____; business _____; utilities _____; outdoors _____; soils _____.

2. Product (check all that apply): Soil _____; groundwater _____; surface water _____; drinking water _____;
utilities _____; land surface _____; biota/wildlife _____; third party impacts _____.

F. SOURCE OF CONTAMINATION

Describe the source or possible sources of contamination. If the source is unknown, describe all equipment at the facility.

TANKS:

Tank #	Age	Capacity (gallons)	Material of Construction	Coating	Cathodic Protection

PIPES:

Tank # (connected)	Age	Length (feet)	Material of Construction	Coating	Cathodic Protection

G. RELEASE RESPONSE

1. Material removed from the excavation (check all that apply):

Water _____, (_____ gal)

Product _____, (_____ gal)

Soil _____, (_____ cubic yds)

2. Disposal of contaminated material

a. Method _____

Approved by _____ Date _____

b. Location _____

_____ 1/4, _____ 1/4, _____ 1/4, Sec _____, T. _____, R. _____.

Approved by _____ Date _____

[illegible][illegible]

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Tier 1 RBCA, 30-day Release Report
FACILITY SKETCH MAP

Sketch showing release location, buildings, tanks and piping, wells, ditches, streams, utilities, etc. Include approximate dimensions and a north arrow. Attach city or topographic map showing facility location.

